

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**REPUBLICAN NATIONAL COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MR. R. HENRY KLEEMAN**

Mailing Address 1230 WILSON DRIVE

City

LAKE FOREST

State

IL

Zip Code

60045-3547

FEC ID number of contributing  
federal political committee.

C

Name of Employer

KIRKLAND & ELLIS LLP

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 17 / 2014

**Transaction ID : 2014M04L11AI03355**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. MR. ARTHUR C. KLEIN**

Mailing Address 668 SILVER OAK GROVE

City

COLORADO SPRINGS

State

CO

Zip Code

80906-8624

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

GENERAL CONTRACTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 19 / 2014

**Transaction ID : 2014M04L11AI03356**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DR. WILLIAM KLEIN**

Mailing Address 102 SPRING CREST COURT

City

BONAIRE

State

GA

Zip Code

31005-4023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 28 / 2014

**Transaction ID : 2014M04L11AI03357**

Amount of Each Receipt this Period

110.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

910.00